Kansas Access to Comprehensive Health

(KATCH)

Agenda

- Introductions

- Background about KHPA and Kansas Medicaid.

- High level overview of health care reform and eligibility.

- Explain our grant from HRSA.

- Invite input and feedback.

Introductions

- Darin Bodenhamer, Director of Eligibility for Kansas Medicaid/CHIP
  - 16 ½ years state service
    - 5 years local SRS office
    - 5 years Health Care Policy—implementation HealthWave clearinghouse, contract management, eligibility policy.
    - 3 years SRS ITS—supervising testers, implementation/technical manager on IT projects.
    - 3 years KHPA as Director of Eligibility

KHPA History

- Precursor, D of A Division of Health Policy and Finance, created in July 2005.
- Health Policy Authority Board created at that time.
- Official start of KHPA July 2006.
- Combined Medicaid, State Employee Health Plan, and State Self Insurance Fund (worker's comp)
- Purpose was originally to coordinate a comprehensive health care agenda for the state, research and report on health care topics, combine operations and purchasing.
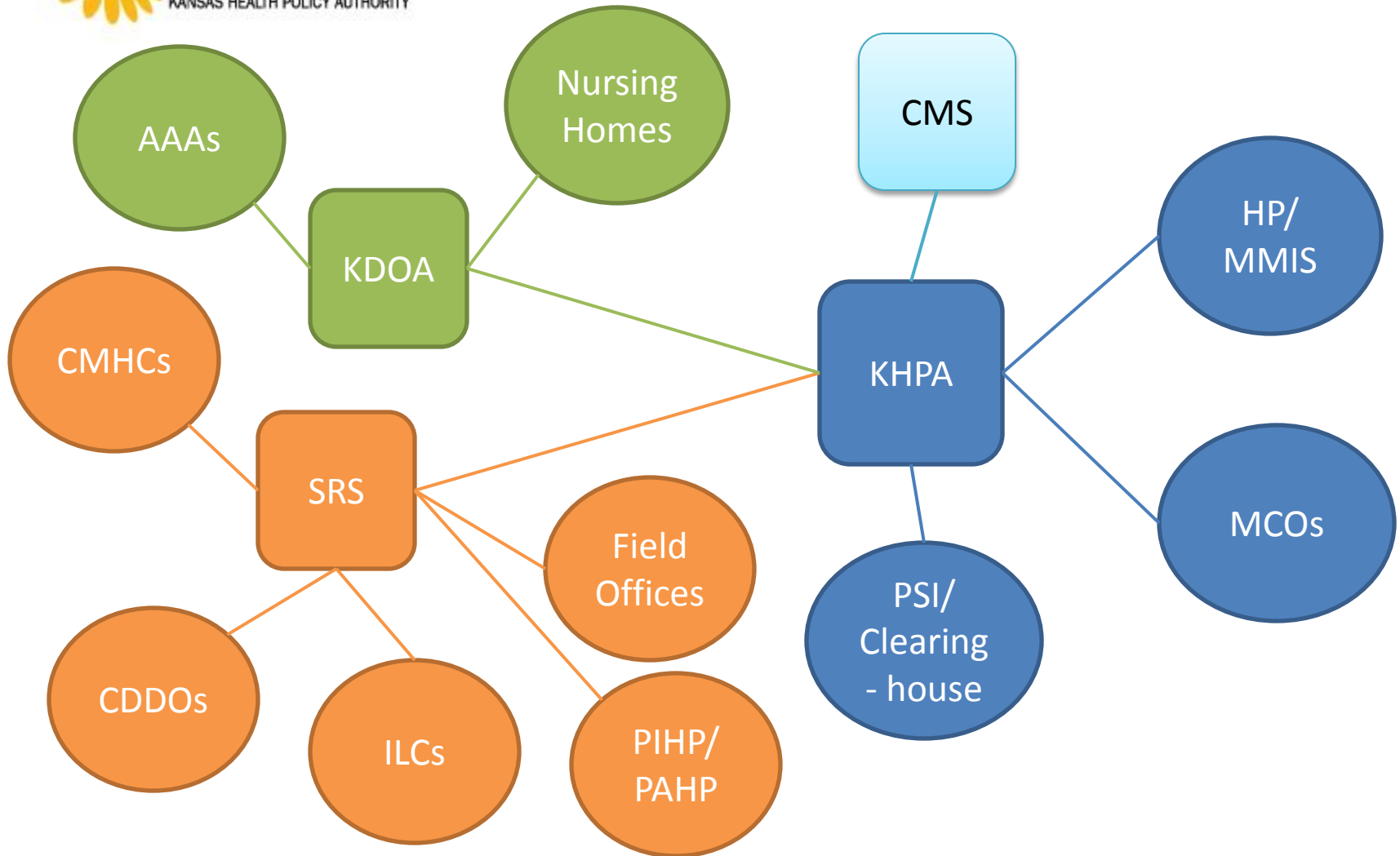
Medicaid Programs

- Over 20 different medical programs
  - Elderly and Disabled
    - Spenddown
    - FE, PD, DD, TA, and HI waivers
    - *WorkingHealthy*/WORK
    - Medicare Savings Programs
  - Family Medical
    - Children and Pregnant Women (PLE and spenddown)
    - Disabled child waivers
    - Caretaker Medical and related programs
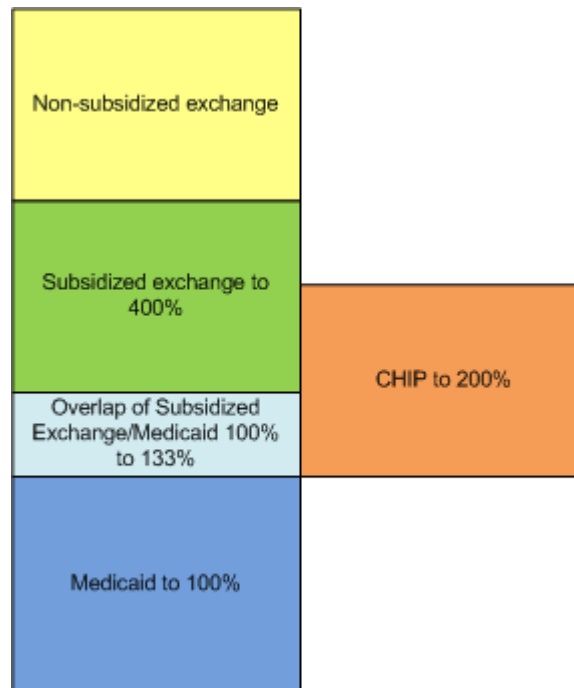
KHPA and Eligibility

- Eligibility Policy
  - Interpret federal and state rules and implement them in policy.
  - Training.
  - Outreach.
- Eligibility Determinations
  - 85% + of all Family Medical determinations are done at Eligibility Clearinghouse.
  - Presumptive Medical Disability (PMD)
  - Presumptive Eligibility
  - The other Family Medical and all Elderly and Disable determinations are done in SRS offices.
- Program Integrity
  - ME/QC.
  - PERM

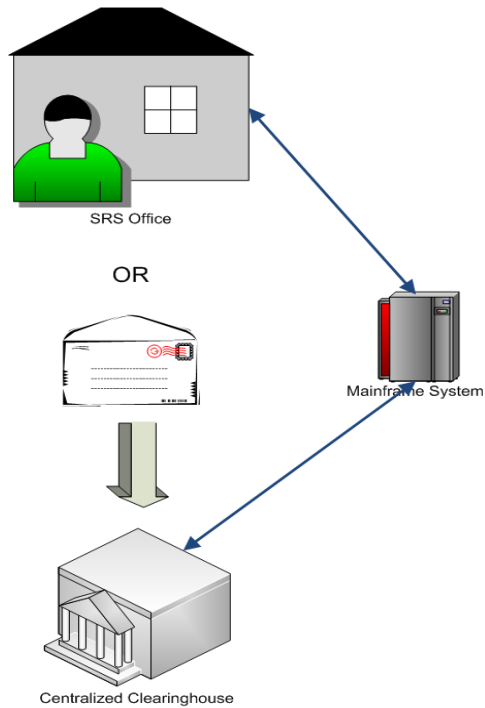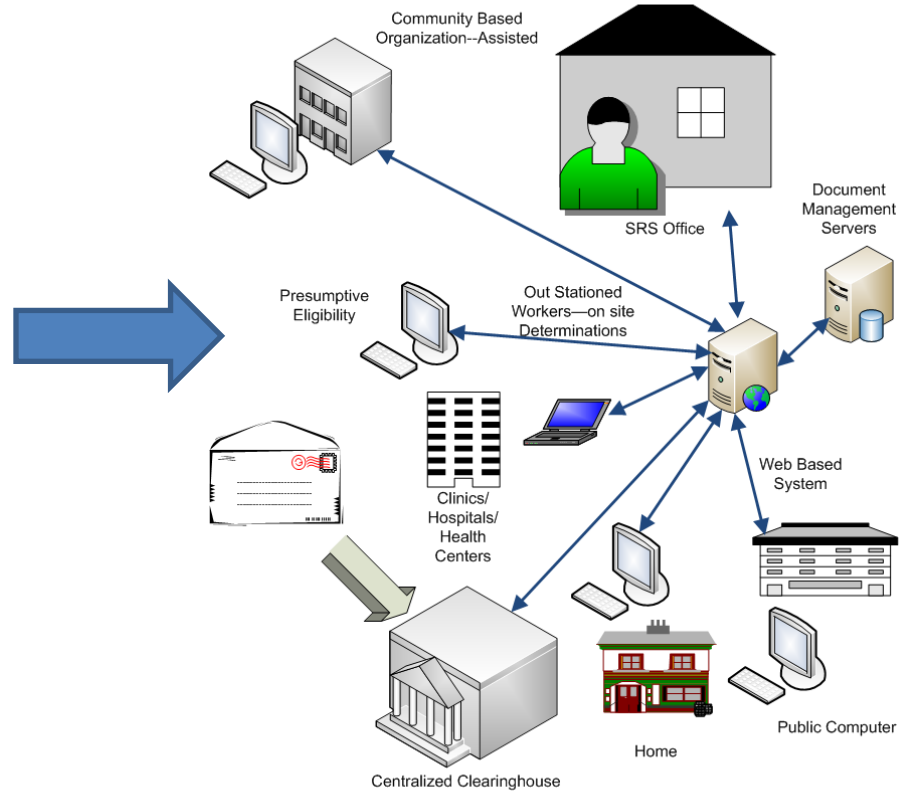# Medicaid Oversight

Health Care Reform

Changing Needs

HRSA Grant

- State Health Access Program (SHAP) Grant from Health Resources and Services Administration (HRSA)

  - Final grant in a series of SHAP grants.

  - Kansas previously had 2 SHAP grants through the Insurance Department.

  - Grant is to provide support for starting up programs that extend coverage to a new segment (not just eligible but unenrolled) of the uninsured population.
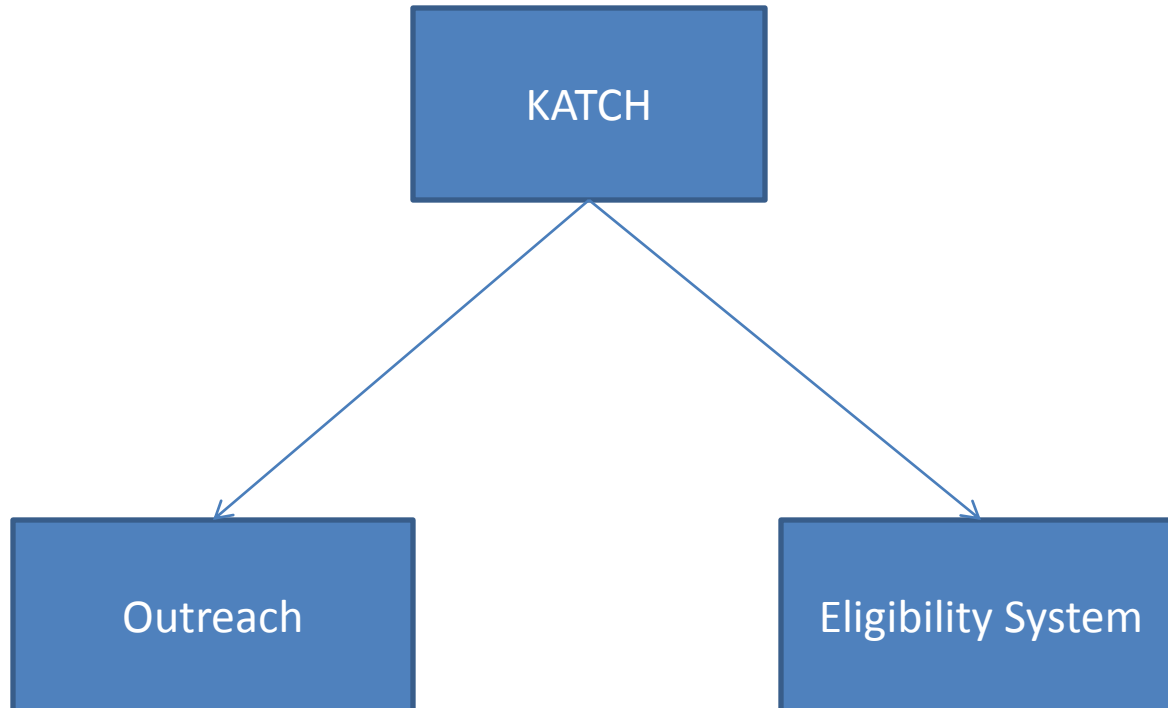
Background

- Funds can be used for administrative support and startup costs.

- One example of how funds can be used is for enrollment systems to get people into the expansion plan.

- Can also be spent on outreach.

- Could request up to $10 million per year for 5 years.

- Competitive grant potentially against all 50 states. Total yearly allocation is around $75 million.

Application and Award

- KHPA's application
  - requested $40.8 million over 5 years
  - $1.8 million first year (awarded)
  - approximately $9.5 million for subsequent years.

- 13 states were awarded grants totaling $70 million for year 1.

- All states must reapply for grants each year to show progress, but they are "non-competitive"—states that were not awarded cannot apply again.

KATCH

Outreach

- Four tiers:

  - 12 eligibility workers outstationed primarily in safety net clinics around the state. Will provide staff and equipment.

  - Increase presumptive eligibility sites (PE). Will provide equipment and training.

  - Leverage community partners with application assistance. Will provide equipment and training.

  - Place "kiosks" in locations around states to appl

Eligibility System

- Create online application for medical coverage and PE screening tool.

- Create full eligibility system for medical programs (Medicaid, SCHIP, Health care reform)

- Provide platform from which other agencies can build to administer means tested programs, e.g., SRS can add cash, SNAP, etc. to platform after medical is implemented.

- Provide platform that can be used in conjunction with future MMIS, scheduled to be re-procured in 2015.
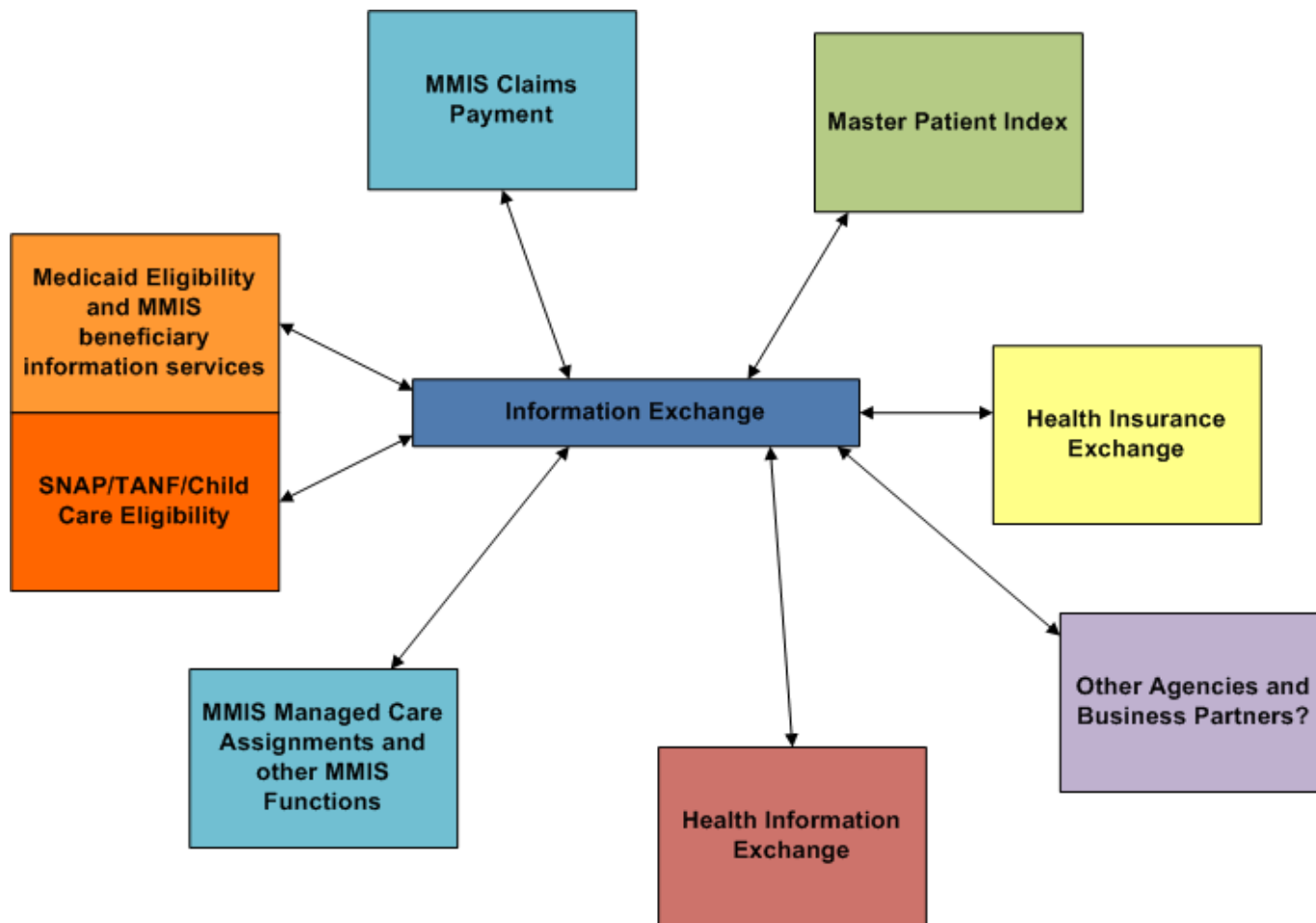
Primary Objectives for KHPA

- Reach the hard-to-reach, un-enrolled populations for all medical programs. "Low-touch" vs. "High-touch"

- Procure and implement new technologies that:

  - are customer centric
  - will streamline enrollment into publically funded health insurance products
  - make the system more user friendly, and less error-prone
  - are flexible and can be potentially be extended to other agencies
  - are easily scalable to accommodate growing client base
  - will provide a platform with which to implement health care reform
  - support the outreach objectives of the KATCH grant
  - interface with other systems to allow for data sharing
  - are user friendly and allow for quicker training of workers with less reliance on workforce knowledge
  - facilitate the implementation of new products, services, and policies quickly
  - support multiple business models and processes

- Ultimately, to reduce un-insurance in Kansas.

Smooth Sailing

Future Possibilities

Feedback

- Survey monkey link:

  http://www.khpa.ks.gov/katch/default.htm

Questions?